## 2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 742153** 

Entity Name: COVENANT LIVING OF FLORIDA, INC.

**FILED** Nov 09, 2022 **Secretary of State** 0798561723CC

### **Current Principal Place of Business:**

5700 OLD ORCHARD RD. SKOKIE. IL 60077

# **Current Mailing Address:**

5700 OLD ORCHARD RD. SKOKIE, IL 60077 US

FEI Number: 52-1115870 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Address

Address

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT, CEO, ASST. Title DIRECTOR, CHAIR

> SECRETARY, EX-OFFICIO Name MANLOVE, MATTHEW CUNLIFFE, TERRI S

Name 5700 OLD ORCHARD RD. Address

5700 OLD ORCHARD RD SUITE 100

SUITE 100 City-State-Zip:

SKOKIE IL 60077 SKOKIE IL 60077 City-State-Zip:

SENIOR VP, GENERAL COUNSEL. Title Title DIRECTOR ASSISTANT SECRETARY

Name VANOVER, ANDREW Name ERICKSON, DAVID G.

5700 OLD ORCHARD RD. 5700 OLD ORCHARD RD. Address Address

> SUITE 100 SUITE 100

City-State-Zip: SKOKIE IL 60077 City-State-Zip: SKOKIE IL 60077

Title DIRECTOR Title SENIOR VICE PRESIDENT/ASSISTANT

SECRETARY Name PALMER, MARY

Name RABE, BILL Address 5700 OLD ORCHARD RD.

Address 5700 OLD ORCHARD RD. City-State-Zip: SKOKIE IL 60077

City-State-Zip: SKOKIE IL 60077

Title **DIRECTOR** Title DIRECTOR/VICE-CHAIR

REPPE, DIXIE Name Name CREANEY, JANET

5700 OLD ORCHARD RD. 5700 OLD ORCHARD RD. Address

City-State-Zip: SKOKIE IL 60077 City-State-Zip: SKOKIE IL 60077

#### Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

11/09/2022 SIGNATURE: DAVID ERICKSON SVP GENERAL COUNSEL

Electronic Signature of Signing Officer/Director Detail

Date

#### Officer/Director Detail Continued:

Title SENIOR VICE

PRESIDENT/CFO/TREASURER/ASSISTANT

**SECRETARY** 

Name JUSTIE, JEAN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name BUETTNER, KATHY

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name PETERSON, LOANN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title ASST. SECRETARY
Name WARNYGORA, EMILY

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title EX-OFFICIO

Name SWANSON-DRAHEIM, TAMMY

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name CHRISTENSEN, PAMELA

Address 5700 OLD ORCHARD RD

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name MEANS, JENNIFER

Address 5700 OLD ORCHARD RD

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name FREDRICKSON, JOHN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name KINCANON, KURT

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR, SECRETARY
Name FLEWELLEN, LORENE
Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name MARTIN, ROBERT

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title EX-OFFICIO

Name POSTON, SUSAN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name HOFFMAN, JANET

Address 5700 OLD ORCHARD RD

City-State-Zip: SKOKIE IL 60077

Title EX-OFFICIO

Name SLECHTA, TODD

Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077